An Essay on

Dysentery,

Respectfully Submitted
to the Faculty of the

Homoeopathic Medical College
of
Pennsylvania,

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By
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Among the various diseases to which Human Flesh is heir, few hold a more prominent place than Dysentery. Though it is a disease upon which the Homoeopath is no wise looks with alarm, yet it is that to which, under the old school treatment, many a fellow creature has sacrificed his life. It varies much in form and severity, depending in a great measure in its character, upon the exciting cause,

climate and constitution of the patient.

The tissue upon which its forces are chiefly concentrated, is the mucous membrane of the rectum. Though this appears to be the seat of the disease, or that point at which it most fully developes itself; it is not the only structure affected. As the disease progresses it extends through the colon, affecting sometimes the small intestines and not unfrequently reaching even the stomach. The neighboring organs of the intestinal track also become sympathetically affected. Neither is the

disease confined alone to the mucous membrane, but extends to the muscular and often peritoneal coat of the intestine.

The abnormal changes brought upon the affected parts, vary according to the severity of the disease. Sometimes they are comparatively slight, at others an entire loss of function and destruction of tissue is produced. The mucous membrane at first inflamed, soon becomes macerated; and the epithelium and at times the entire mucous coat exfoliates in strips and circumscribed spots, leaving an excoriated surface. Ulceration supervenes and is often very extensive.

This being the state of the diseased tissue, we of course must look for a discharge both of blood and purulent matter. And not unfrequently shall we meet with the loss of portions of the epithelium; and in the severe forms of the disease the stool is mixed with gangrenous exfoliated parts of the entire mucous membrane.

The neighboring organs, as already noticed, sympathize in the disease. The mesenteric glands frequently become swollen and the peritoneum inflamed. Inflammation and sometimes abscess of the liver and enlargement and softening of the Spleen,

are frequently present in protracted cases. The bladder is more or less affected and its functions often much disturbed. The patient is troubled with much pain and has considerable fever. In the acute form of the disease he has an accelerated pulse, but in its typhoid character the fever is of a typhoid nature and the pulse small and feeble. He soon becomes weak and exhausted and death too often ends the scene.

This disease has been variously devided in its varieties by different authors. Some have made but two general devisions

Acute and Chronic. The former embraces all the common forms of the disease characterized by the usual symptoms. In the latter as as given by Mackintosh who makes this devision, the stools are free from blood, sometimes brown, at others greenish or yellow and occasionally of a rice-water appearance. There is also a less inflammatory state of the system.

To this devision there are some objections. The acute variety embraces too wide a range. It might be either of a simple catarrhal form, highly inflammatory or of a torpid character. Of the Chronic variety I confess I cannot

see the peculiar characteristic symptoms fully marked out so as to distinguish it from the former.

The most natural division as made by any author of my acquaintance, is by a physician of the Homoeopathic school, in a treatise on this subject. He has distinguished three varieties of the disease, the erethic, synochal and adynamic.

The first of these is characterized by slight fever, colicky pains in the bowels, yet the abdomen is free from soreness, evacuations still colored with bile, feculent, mucous and bloody. They seldom exceed

twelve or eighteen in 24 hours.
Genesmus is but slight.

The second or synochal variety as the term indicates, is of a highly inflamatory character. The attack and all the attending symptoms are much more violent and the pains and suffering are severe. The movements of the bowels are frequent and sometimes accompanied with a profuse discharge of blood. The stomach and small intestines frequently become affected. the fever is inflammatory and often attended with intolerable thirst.

The third or adynamic variety

differs from the former in being of a typhoid character. The whole system is much debilitated and appears to be in a torpid condition. The number of stools is unusually large, sometimes as high as 150 or 200 in 24 hours. The evacuations are bloody, brownish or black and very offensive. The tenesmus is violent and the fever is of a typhoid character.

The physical signs that characterize this disease are easily recognized. The premonitory symptoms usually present, are a sense of lassitude, want of appetite, nausea, bad taste in the mouth, slight

chills alternating with flushes of heat, transient pains in the bowels, costiveness or diarhea. Sometimes however, these premonitions are wanting and the more formidable symptoms present themselves.

As the disease progresses there is pain in the bowels of a griping or colicy nature, fixed pain in the epigastrium and along the track of the colon, pains excited by taking the mildest substance particularly cold water, tenesmus, cutting and scalding pain in the rectum especially when at stool, flatulency and borborygmus, frequent desire to go to stool, evac-

mations consist of mucous, blood, epithelium, shreds, pus, watery, slimy, or gelatinous matter, sometimes contain small lumps like fat, sometimes fecal matter and sybalae; they are brown, dark, green or yellow and at times very offensive. The abdomen is sensitive to pressure, there is difficulty in voiding urine, fever, thirst, coldness of extremities.

The causes which tend to develope this disease are not unfrequently obscure. But they often can be traced to the immoderate use of unripe fruit, indigestible and unwholesome food, or some

irritating article received into the bowels. Cold and damp, and suddenly succeeding warm weather, and the warm days and cool nights of Autumn, are also very common exciting causes. Obstructed perspiration from cold, too may produce a mucous inflammation of the intestinal canal and thus induce a development of the disease. Dysentery like typhus and intermittent fevers, frequently springs from miasmatic influence. But the warm and debilitating climate of the tropical regions, is the most prolific source of the disease; and this may be owing to a greater

miasmatic influence there acting upon the system.

Dysentery may appear sporadically or as an epidemic. In the latter form it is by some considered contagious. But I think its prevalence can be accounted for from some miasmatic or epidemic influence, rather than from contagion.

The prognosis varies much according to the character of the disease. In the typhoid and putrid varieties the mortality sometimes is very great. In the milder form a favorable termination usually follows. The

prognosis under Homoeopathic treatment has been much more favorable than under Allopathic.

The remedies which are chiefly used in the treatment of Dysentery are, Acs. Acid.nitr. Aloes. Ars. Bell. Camth. Capsicum, Carbo.veg. Cham. Colch. Colo. Dulc. Ipec. Merc. Nux.vom. Puls. Rhus. Staph. Sulph. and Verat. Arn. also has been very successfully used by some during the last year. The characteristic indication for each remedy I shall not give, as it would of necessity be but a transfer from books.